

## UNITED STATES DEPARTMENT OF COMMERCE U.S. Patent and Trademark Office

Address: COMMISSIONER FOR PATENTS P.O. Box 1450

P.O. Box 1450 Alexandria, Virginia 22313-1450

APPLICATION NO./	FILING DATE	FIRST NAMED INVENTOR /	ATTORNEY DOCKET NO.
CONTROL NO.		PATENT IN REEXAMINATION	

EXAMINER

ART UNIT PAPER

22

DATE MAILED:

Please find below and/or attached an Office communication concerning this application or proceeding.

**Commissioner for Patents** 

THE NAME CHANGE WILL BE CHANGED TO JAMES VERNON CASE AS SHOWN ON THE DECLARATION. THIS CHANGE WILL TAKE PLACE IN THE SYSTEM. THE NOTICE OF ALLOWNANCE WILL NOT BE CHANGED BECAUSE ONCE IT HAS BEEN CHANGED IN THE SYSTEM THE NAME WILL APPEAR CORRECTLY ON THE PATENT.

## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail

Mail Stop ISSUE FEE Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450 (703) 746-4000

or Fax

John D. Jeter P. O. Box 846 St. Martinville, LA 76  APPLICATION NO. 10/699,420				papers. Each addition have its own certific	onal paper, such as an assign cate of mailing or transmission Certificate of Mailing or Tru t this Fee(s) Transmittal is bu- e with sufficient postage for fail Stop ISSUE FEE addm SPTO (703) 746-4000, on the	ensmission			
P. O. Box 846 St. Martinville, LA 76	0582			I hereby certify that States Postal Servic addressed to the M transmitted to the U	Certificate of Mailing or Tri t this Fee(s) Transmittal is but with sufficient postage for fail Stop ISSUE FEE addn	ansmission eing deposited with the United first class mail in an envelope			
St. Martinville, LA 70	0582			I hereby certify that States Postal Service addressed to the Management of the U	t this Fee(s) Transmittal is be with sufficient postage for fail Stop ISSUE FEE addn	eing deposited with the United first class mail in an envelope			
APPLICATION NO.	0582			addressed to the M	fail Stop ISSUE FEE adding	iirsi ciass maii in an envelope			
					SPTO (703) 746-4000, on th	ess above, or being facsimile ne date indicated below.			
						(Depositor's name)			
						(Signature)			
						(Date)			
10/699 470	FILING DATE	FIR	IST NAMED IN	VENTOR	ATTORNEY DOCKET NO	. CONFIRMATION NO.			
10/075,420	10/31/2003		James Vern	on CASE	525	2072			
TITLE OF INVENTION: TRA			<u>_</u>	li la		is Case			
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE			
nonprovisional	YES	\$700	_	\$0	\$700	06/14/2005			
EXAMIN	ER	ART UNIT		CLASS-SUBCLASS	<b>」                                    </b>	Leur .			
WILSON, I	LEE D	3723		029-281500	•	1 W/LC			
1. Change of correspondence as CFR 1.363).	ddress or indication of "Fo	` . I		on the patent front page					
Change of corresponden	ce address (or Change of	Correspondence	(1) the names or agents OR,	of up to 3 registered pa alternatively,	tent attorneys				
Address form PTO/SB/122)  "Fee Address" indication		.i 6	(2) the name o	f a single firm (having a	as a member a 2	· · · · · · · · · · · · · · · · · · ·			
PTO/SB/47; Rev 03-02 or r Number is required.	nore recent) attached. Use	of a Customer	2 registered pa listed, no name	mey or agent) and the n tent attorneys or agents. will be printed.	If no name is 3				
3. ASSIGNEE NAME AND R					<del></del>				
PLEASE NOTE: Unless an recordation as set forth in 37	assignee is identified be CFR 3.11. Completion	low, no assignee date of this form is NOT a	ta will appear of substitute for f	on the patent. If an ass iling an assignment.	ignee is identified below, th	e document has been filed for			
(A) NAME OF ASSIGNEE				CITY and STATE OR C	•				
					<b>.</b> .				
						_			
Please check the appropriate as					Corporation or other private	group entity Government			
4a. The following fee(s) are end Issue Fee	ciosea:	_	ayment of Fee(						
Publication Fee (No small entity discount permitted)			A check in the amount of the fee(s) is enclosed.  Payment by credit card. Form PTO-2038 is attached.						
Advance Order - # of Copies			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to						
	·		eposit Account	Number	(enclose an extr	a copy of this form).			
5. Change in Entity Status (fro a. Applicant claims SMA		_	) k			455 4 554 345			
					IALL ENTITY status. See 37				
NOTE: The Issue Fee and Publ nterest as shown by the records	ication Fee (if required) was of the United States Pate	rill not be accepted from the and Trademark Off	om anyone oth	er than the applicant; a r	usly paid issue fee to the apple egistered attorney or agent; o	lication identified above. r the assignee or other party in			
Authorized Signature			Date						
Typed or printed name									
This collection of information i	s required by 37 CFR 1.3	1. The information is	s required to ob	tain or retain a benefit b	y the public which is to file (	and by the USPTO to process)			
in application. Confidentiality is submitting the completed appli his form and/or suggestions fo Box 1450, Alexandria, Virginia	is governed by 35 U.S.C. cation form to the USPT( reducing this burden, she 22313-1450. DO NOT!	122 and 37 CFR 1.14  D. Time will vary der ould be sent to the Ch SEND FEES OR COM	4. This collecting upon the collection of the co	on is estimated to take I he individual case. Any n Officer, U.S. Patent at RMS TO THIS ADDRE	2 minutes to complete, inclu comments on the amount of and Trademark Office, U.S. D	and by the USPTO to process) ding gathering, preparing, and time you require to complete epartment of Commerce, P.O. er for Patents, P.O. Box 1450,			

	SIMI	Weart's	FEE(S)	LAC TRAN	SMITTAL	dTo		
	this form, together wit		or <u>I</u>	Eax (	Mail Stop ISSUE Commissioner fo P.O. Box 1450 Alexandria, Virg 703) 746-4000	r Patents () inia 22313-1450	1PE	
instructions: This for appropriate. All further co- indicated unless corrected maintenance fee notification	ociow or directed otherwise	smitting the ISSUI Patent, advance ord in Block I, by (a)	E FEE and lers and noti specifying a	PUBLICA fication of a new con	ATION FEE (if requi) of maintenance fees we respondence address;	red). Blocks I through 5 rill be mailed to the currer and/or (b) indicating a se	should be completed where it correspondence address as parate "FEE ADDRESS" for	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)  7590  John D. Jeter P. O. Box 846 St. Martinville, LA 70582				, F	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.  Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (703) 746-4000, on the date indicated below.			
	( )(		NN (	-			(Depositor's name)	
				-			(Signature) (Date)	
APPLICATION NO.	FILING DATE	F	IRST NAME	D INVENT	OR .	ATTORNEY DOCKET NO.	CONFIRMATION NO.	
10/699,420	10/31/2003	<u> </u>	James \	Vernon (	CASE	525	2072	
TITLE OF INVENTION: TRANSMISSION ASSEMBLY TOOLS  HIR Last Name is Mussence								
APPLN, TYPE	SMALL ENTITY YES	ISSUE FE	Ε	/ /PUE	LICATION FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional		\$700			\$0	\$700	06/14/2005	
L	MINER N, LEE D	ART UNI 3723	<u>т</u>		ASS-SUBCLASS			
			2. For printing on the patent front page, list					
CFR 1.363).  Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer 2 registered attached.				mes of up OR, altern me of a si attorney of ad patent a	of up to 3 registered patent attorneys			
	RESIDENCE DATA TO B							
recordation as set forth in	s an assignee is identified be n 37 CFR 3.11. Completion	low, no assignee d of this form is NOT	ata will appo	ear on the for filing	e patent. If an assign an assignment,	ee is identified below, the	document has been filed for	
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
Please check the appropriate  4a. The following fee(s) are			nted on the payment of		☐ Individual ☐ Co	orporation or other private g	group entity Government	
lssue Fee			A check i	in the amo	ount of the fee(s) is en			
Publication Fee (No small entity discount permitted)		•	Payment by credit card. Form PTO-2038 is attached.					
5. Change in Entity Status (from status indicated above)			The Director is hereby authorized by charge the required fee(s), or credit any overpayment, to Deposit Account Number (enclose an extra copy of this form).					
	(from status indicated above		b. Applica	ant is no l	onger claiming SMAJ	L ENTITY status. See 37 (	CFR 1.27(g)(2).	
The Director of the USPTO NOTE: The Issue Fee and P interest as shown by the rec	is requested to apply the Issu hiblication Fee (if required) wo ords of the United States Pate	e Fee and Publicati vill not be accepted int and Trademark (	on Fee (if an from anyone Office.	y) or to re other tha	happly any previously n the applicant; a regi	y paid issue fee to the appli stered attorney or agent; or	cation identified above, the assignee or other party in	
Authorized Signature		4.			Date			
	<del></del>		·		Registration	No		
	on is required by 37 CFR 1.3 ity is governed by 35 U.S.C. pplication form to the USPT's for reducing this burden, shinia 22313-1450. DO NOT 1450. tion Act of 1995, no persons						nd by the USPTO to process) ing gathering, preparing, and time you require to complete partment of Commerce, P.O. r for Patents, P.O. Box 1450, ol number.	
PTO1 95 (Par. 12/04) 4								